

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	
Title::	DELAYED ANNUNCIATION OF RECEIPT JAM FOR AUTOMATED BANKING MACHINE
Attorney Docket Number::	D-1173 R
Request for Early Publication?::	No
Request for Non-Publication?::	Yes
Suggested Drawing Figure::	1
Total Drawing Sheets::	27
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No
Suggested Classification::	235/375

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas
Middle Name:: S.
Family Name:: Mason
Name Suffix::
City of Residence:: North Canton
State or Province of Residence:: OH
Country of Residence:: US
Street of mailing address:: 1205 Echo Street, NE
City of mailing address:: North Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44721 ~~44720~~

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Bryan
Middle Name:: K.
Family Name:: Reed
Name Suffix::
City of Residence:: Canal Fulton
State or Prov. Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 9975 Beryl Street, NW
City of mailing address:: Canal Fulton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44614

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jeffrey
Middle Name:: A.
Family Name:: Brannan
Name Suffix::
City of Residence:: Massillon
State or Prov. Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 4996 Sherlin Avenue, NW
City of mailing address:: Massillon
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44646

Correspondence Information

Correspondence Customer Number:: 28995

Representative Information

Representative Customer Number::	28995
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/422,664	10/31/2002

Assignee Information

Assignee Name:: Diebold Self-Service Systems
Division of Diebold, Incorporated
City of mailing address:: North Canton
State or Province of mailing address:: OH